Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506 CANDIDATE / OFFICEHOLDER REPORT: FORM C/OH - FR **DESIGNATION OF FINAL REPORT** The Instruction Guide explains how to complete this form. •• Complete only if "Report Type" on page 1 is marked "Final Report" •• C/OH NAME 2 ACCOUNT # (Ethics Commission filers) DAVID CARPONTER ROBERT I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file ature of Candidate / **FILER WHO IS NOT AN OFFICEHOLDER** .. Complete A & B below only if you are not an officeholder. .. CAMPAIGN FUNDS Check only one: I do not have unexpended contributions or unexpended interest or income earned from political contributions. I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204. В. **ASSETS** Chec

I do not retain assets purchased with political contributions or interest or other income from political contributions.

I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204.

Signature of Capdidate

OFFICEHOLDER

•• Complete this section only if you are an officeholder ••

I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, at the time I cease holding office, I retain assets purchased with political contributions or interest or other income from political contributions.

Signature of Officeholder

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH

	THANGE REPORT	COVER SHEET PG 1
The C/OH INSTRUCTION this form.	N GUIDE explains how to complete 1 ACCOUNT# (Ethics Commission filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR RIST MI	OFFICE USE ONLY
TO WILL	NICKNAME LAST SUFFIX DAVIO CARPENTER	Date Received
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE 6023 ARCHWOOD 8AN ANTONIO, TX 78239	Date Hand-delivered or Date Postmarked
Change of Address 5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (210) 650-5045	Receipt # Amount
6 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST MI MICHAEL NICKNAME LAST SUFFIX LACKEY	Date Processed Date Imaged
7 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY: STATE; SAN ANTONIO, TX 78217	ZIP CODE
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION 230	
9 REPORT TYPE	January 15 30th day before election Runoff July 15 8th day before election Exceeded \$500 limit	15th day after campaign treasurer appointment (officeholder only) Final report (Attach C/OH - FR)
10 PERIOD COVERED	Month Day Year THROUGH 12/31	Year /2 06-3
11 ELECTION	ELECTION DATE ELECTION TYPE Month Day Year Primary Runoff	General Special
12 OFFICE	OFFICE HELD (if any) 13 OFFICE SOUGHT (if known	1)
14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS	Direct campaign expenditures are campaign expenditures made by others without the canc Candidates are required to disclose this information only if they receive notification of the dire Name	didate's prior consent or approval. ct campaign expenditure. ••
additional pages	Address / PO Box; Apt. / Suite #; City; State; Zip Code	
	GO TO PAGE 2	

	C/OH Name: CAF				[15] Account	: 00000000
[16]	POLITICAL COCOMMITTEES to ho	ommittees fo ures may ha older's know	or candida ve been ma wledge or to report	tes or officel de without the consent. Can this informa	expenditures by holders. These e candidate's or didates and offi the	expendi- office- ceholders
() additional		•		nal on specific)	•
	Commit	tee name:	Committee	ee Type (Gene	ral or Specific)	2001
	Committee	address:				2004 JAN 16
	Committee T Treasurer					5 AN IO:
[17]	NO REPORTABLE ACTIVITY	() Check this	here if r reporting	o reportable period. (Si	activity occurre gn affidavit bel	d during
[18]	CONTRIBUTION TOTALS	or les	s (other t	contributions han pledges, pans) unless i	loans or	\$0.00
		(other		CONTRIBUTIONS lges, loans, o pans)		\$0.00
	EXPENDITURE TOTALS	3. Total or les	political s, unless	expenditures itemized	of \$50	\$0.00
		4. TOTAL	POLITICAL	EXPENDITURES		\$439.70
	OUTSTANDING LOAN TOTALS	5. Total loans	principal as of the	amount of all last day of t	outstanding he reporting per	\$0.00 riod
[19]	AFFIDAVIT		that the	accompanying udes all infor by)me under	under penalty of report is true a mation required itle 15. Electic	ind correct to be on Code.
	x Notary Stamp				date or Officeho	lder
	n to and subsc the <u>\$4</u> day o and seal of p		e me, by	the said Ro , 1820; to ce	bed David Prtify which, with	<u>Carpente</u> ,
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	ature of offic nistering oath		name of o	i contract of the contract of	Title of of administer	fficer ing oath
Form	approved 09/0	 1/1997 by т	exas Ethi	cs Commission	Page Pri	nted: 20
POLI	======================================	======== URES	========		:======================================	SCHEDULE F
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	MICHELLE RICHTER	es l		Page 2	. -	



ETHICS

[2]	Filer Name: CARPENT		'DAVID"	[3] Account #: 0000	0000	
[4]	Date: 07/31/2003					
[5]	Payee name:	U.S. POSTAL SERVI	CCE			
[6]	Payee address:	SERNA STATION SAN ANTONIO TX	78218		2004 JAH 16	
[7]	Amount: \$40.70				7.25	£
[8]	Purpose of expendit Postage	ure:				•
[9]	** Complete if dire	ct expenditure to	benefit C/OH	**	M 10: 07	
	Candidate/Office Office	holder name: held/sought:			9	
[4]	Date: 08/05/2003					
[5]	Payee name:	GRAU, LAURA				
[6]	Payee address:	15873 REDWOODS MASAN ANTONIO TX				
[7]	Amount: \$325.00					
[8]	Purpose of expendit Reimbursement of ex	ure: penses				
[9]	** Complete if dire	ct expenditure to	benefit C/OH	* *		
	Candidate/Office Office	holder name: held/sought:				
[4]	Date: 12/22/2003					
[5]	Payee name:	U.S. POSTAL SERV	ICE			
[6]	Payee address:	SERNA STATION SAN ANTONIO TX	78218			
[7]	Amount: \$74.00					
[8]	Purpose of expendit Postage	cure:				
[9]	** Complete if dire	ect expenditure to	benefit C/OH	* *		
				=======================================		
For	m approved 09/01/199	7 by Texas Ethics	Commission	Page Printed:	30	
POL	ITICAL EXPENDITURES			SCHEDU	JLE F	
===				l pages Schedule F:		
[2]	Filer Name: CARPENT	ER JR, ROBERT D.		[3] Account #: 0000	00000	

ETHICS

Form approved 09/01/1997 by Texas Ethics Commission Page Printed: 45

ADDENDUM TO FORM C/OH Cover Sheet
SUMMARY OF PAGES PRINTED FOR REPORT DUE 01/15/2004

[1] Total pages this Addendum: 1

[2] Filer Name: CARPENTER JR, ROBERT D. "DAVID" [3] Account #: 00000000

ETHICS



2004 JAN 16 AM 10: 07

Cover Sheet (Form COH):
Political Expenditures - Schedule F:
Addendum to Cover Sheet - Summary Report (this page):

Total Pages Printed: 5

PLEASE SUBMIT THIS PAGE WITH REPORT

NOTE: INCLUDE OTHER PAGES SUBMITTED IN TOTAL ON FIRST PAGE. Example: Information about an out-of-state PAC if you are required to file it with this report.

_______ Include addendum pages in total pages filed on Cover Sheet Page 1 ______

______ Form approved 09/01/1997 by Texas Ethics Commission Page Printed: